PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			15					RATE FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			15 minus 20=		* /	* 1		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 mi	nus 3 =	*			X43=		OR	X86=	·
MULTIPLE DEPENDENT CLAIM P			RESENT		,			+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2	•	TOTAL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II								SMALL	CNITITY	OR	OTHER SMALL	
	1	(Column 1) CLAIMS		(Colun		(Column 3)	1 r	SIVIALL		Un 1	SWALL	
ENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		=		X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=		OR	+290=	
								TOTAL		اا	TOTAL	
(Oalum 14)								ADDIT. FEE		OR ,	ADDIT. FEE	
_		(Column 1) (Colum			(Column 3)	1 г		*DDI	1		*DDI	
ω	'	REMAINING		NUME	BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
S	!	AFTER AMENDMENT		PREVIC PAID I		EXTRA		no.	FEE		INAIL	FEE
AMENDMENT B	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚┟	+145=		OR	+290=	·
								TOTAL			TOTAL	
								DDIT. FEE		OR,	ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)	_					
ပ	`	CLAIMS REMAINING		HIGHE NUME		PRESENT	lΓ		ADDI-			ADDI-
AMENDMENT (· ·	AFTER AMENDMENT		PREVIO PAID F	DUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	,	= .		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=	 	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									0,,		
+ 16 the parties in column 1 is loop than the option in column 0 write #0" in column 0								+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
•	The "Highest Num	nber Previously Paid	d For" (Total or	Independe	ent) is the	highest numbe	er four	nd in the app	ropriate box	c in coli	umn 1.	